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									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004										10/649801					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EH	πιγ <sup>/</sup> ⊐ .	OR	OTHER			
TO	OTAL CLAIMS		Ī		l'			RATE		FEE	1	RATE	FEE		
FO	PR·		NUMBER	FILED	NUMBER EXTRA			BASIC F	ĘĘ	395.00	OR	BASIC FEE	790.00		
TO	TAL CHARGE	ABLE, CLAIMS	mil	minus 20=		•		× 25			OR	×.50			
INC	DEPENDENT C	LAIMS	<del> </del>	inus 3 =	•				$\neg$						
MU	ILTIPLE DEPEN	NDENT CLAIM P	ــــــــــــــــــــــــــــــــــــــ	ll			x/0				OR	x 200	<del></del>		
							l	+180	)		OR	+360			
* If the difference in column 1 is less than zero, enter *0" in column 2 TOTAL OR TOTAL										,					
CLAIMS AS AMENDED - PART II							•	IAMS	ſF	үттү	OR	OTHER SKALL			
	101	(Column 1) CLAIMS	1	(Colun	EST	(Column 3)	1			ADDI-			ADDI		
ENT	7/3/05	REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE		IIONÁL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	. 5	Minus	- 2	0	=		x 25	<i>,</i>		OR	×50.			
ME	Independent	. 3	Minus	*** (	3	=		×10			OR	x200			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1					
								+ 180		4}	OR	+360 101/1			
								ADOIT, FE			OR	ADDIT, FEE	·····		
		(Column 1)	T	(Colun		(Column 3)	1 1			ADDI-	1		ADDI-		
8 TK		REMAINING AFTER		PREVIO		PRESENT EXTRA		RATE		TONAL FEE		RATE	TIONAL FEE		
10	Total	`	Minus	,,		1 =		x 25	j i		on	x50.			
AR.	Independal	·	Minus					× 100			OR	1200			
	FIRST PRESENTATION OF MULTIPLE CEPENDENT CLAIM						1		$\neg$		OR	+360			
							į	+/80	+			TOTAL			
							,	NDOIT, FE	E I	!	OII,	ADDIT. FEE			
	CEARS   PAGREST   1							-xe,177	i	-ICQA	í		/d.,dd:		
ENTC		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PREȘENT EXTRA		RATE		IONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	*	Minus	44		=		×25			or	× 50			
	Independent	•	Minus	***		=	<b> </b>	X. 100	-1-		OR	1,200			
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del></del>	1		UR	2/ 0			
	of the enter in order	Da 1 h bestoss #	som in som	con 2 kairs	*0* %a ~~*	iugus 3		+ 180	_[_		OR	+560			
••	K the Highest Hu	mn 1 is less than the miser Previously Pa dulous Previously Pa	id For IN THE	S SPACE is	less the	n 20, enle: 720.	. ,	1014 DOM, FE	. 1		ori ,	TOTAL ADDIT, FEE			
	ii uia : Lignesi Nu	inber Previously Pa	אריא עביין	SOFACE	. rc>5 III2	hishadaran	× 10	adia the	•~~~	oniste bor	la cot	umo 1 .			

## EST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION	<b>RECORD</b>
Effective January 1, 2003	

Application or Docket Number

10/649801

CLAIMS AS FILED - PART I (Column 1) (Co						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN	
ТО	TAL CLAIMS		15				RATE		FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		BASIC	EE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	/ (v min	us 20=	*		X\$ 9	-		OR	X\$18=	
IND	EPENDENT CL	AIMS	mir	nus 3 =	*		X42:	:		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140	=	-	OR	+280=	
* If the difference in column 1 is less than zero, enter "						olumn 2	TOTA	L		OR	TOTAL	Se
	C	LAIMS AS A	MENDED				CAAA		NTITY	OR	OTHER SMALL	
		(Column 1) CLAIMS		(Colur		(Column 3)	SIVIAL				SWALL	
ENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**			X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL 4154	-	X42=	:		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=	
TOTAL ADDIT. FEE										OR	TOTAL	·
										JO.,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RATE		TIONAL		RATE	TIONAL FEE
NDW	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=			OR	X84=	
L	FIRST PRESE	Ш	+140			OR	+280=					
							101				TOTAL	
							ADDIT. F			OR	ADDIT. FEE	
_		(Column 1)		(Colui		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
AME	Independent	*	Minus	***		-	X42=			OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=								OR	+280=		
٠	If the entry in colu	mn 1 is less than ti	he entry in colu	mn 2, write	e "0" in co	lumn 3.	TO1				TOTAL	
•	If the "Highest Nu	mber Previously Particusty P	aid For IN TH	IS SPACE	is less tha	an 3, enter "3."	ADDIT. F	EE		OR	ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												